PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003														
								10688753						
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	EN	τιτγ □	OR	OTHER SMALL		
T	OTAL CLAIMS	.	20					RATE		FEE	7	RATE	FEE	1
FC	OR		NUMBER FILED		NUMBER EXTRA			BASIC F	ΈE	385.00	OR	BASIC FEE	770.00	
TC	TAL CHARGE	ABLE CLAIMS	20 - minus 20=		·6			X\$ 9:	-		OR	X\$18=		l
INDEPENDENT CLAIMS			5_ minus 3 =		2		3	X43=			OR	X86=	172,1	5
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145:	_		OR		1161	ľ
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTA			OR	TOTAL	942,1	h
CLAIMS AS AMENDED - PART II												OTHER	7	Į,
_	11102	(Column 1)	(Column 2) (Column			(Column 3)		SMAL	L ENTITY		OR	SMALL		
AMENDMENT A	1	REMAINING AFTER AMENDMENT		NUMB PREVIOI PAID F		PRESENT EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 25	Minus	- 5		=		X\$ 9=			OR	X\$18=		
	Independent +		Minus			-		X43=			OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									T		OR	+290=		
•									٠			TOTAL		
		(Column 1)		(Colum	n 2)	(Column 3)		VDDIT. FE	- L			ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F		ER PRESENT USLY EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	tek		=	$ \cdot $	X\$ 9=	T		OR	X\$18=		
	Independent	•	Minus	***		-	À	X43=	Ť		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	+290=		
							L	+145= TOTA			OB	TOTAL		
		(Column 1)		(Colum	n 2\	(Column 3)	A	DOIT. FEI	E L		•··· /	ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA		RATE	TI	ONAL		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		• .		X\$ 9=	T		OR	X\$18=		İ
	independent		Minus	***			H	X43=	╁					
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ŀ	A43=	╀		OR	X86=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.														
H	the "Highest Nur	mber Previously Pai	d For IN THIS	S SPACE is	less than	20. enter "20."	ΔΓ	TOTAL			OR ,	TOTAL DOIT, FEE		
1	i ine "Highest Num he "Highest Num	mber Previously Pa ber Previously Paid	id For IN THI: For (Total or	S SPACE is Independer	less than nt) is the l	3, enter "3." highest number				oriate box				

Application or Docket Number